



***NATIONAL EVANGELISM FUND: LOCAL CHURCH GRANT  
Accountability Report***

Church Name:

Diocese:

Pastor:

Presiding Bishop:

Name of the Event/ Program:

Date of the Event/Program:

***PLEASE PROVIDE A SUMMARY (LESS THAN A PAGE) OF THE EVENT AND HOW THE FUNDS WERE USED.  
PLEASE INCLUDE A DISK OR LINK TO PICTURES OF THE EVENT AS WELL.***

***THIS FORM MUST BE COMPLETED AND RETURNED BEFORE ANY ADDITIONAL APPLICATIONS WILL BE  
REVIEWED.***

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FIRST AND LAST NAME

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SIGNATURE AND DATE

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POSITION AT CHURCH: